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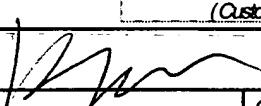
PTO/SB/21 (01-03)  
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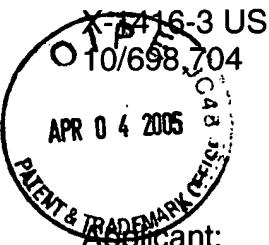
<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application / Conf. No.	10/698,704 / 1939
		Filing Date	October 31, 2003
<b>Mail Stop: AMENDMENT</b>		First Named Inventor	Robert O. Conn
		Examiner Name	Alexander O. Williams
		Art Unit	2826
		Patent No.	
Total Number of Pages in This Submission		Attorney Docket Number	X-1416-3 US

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Amendment / Reply <ul style="list-style-type: none"> <li><input type="checkbox"/> Preliminary Amendment</li> <li><input type="checkbox"/> After Final</li> <li><input type="checkbox"/> Affidavit(s)/declaration(s)</li> </ul> <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Change Status to LARGE ENTITY <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Substitute PTO-1449(s) IDS by Applicant (PTO/SB/08A) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <ul style="list-style-type: none"> <li><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53</li> </ul>	<input type="checkbox"/> Assignment Papers (with Recordation Cover Sheet) <input type="checkbox"/> Declaration / Oath <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition -  <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Customer Number	<b>24309</b> <i>(Customer Number)</i>		Reg. Number 37,652
Attn:	Kim Kanzaki	 [Handwritten signature of Kim Kanzaki]	
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Date	March 31, 2005	Charge any additional fees required/credit any overpayment to our Deposit Account Number: 24-0040	

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on this date: March 31, 2005			
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PATENT  
Conf. No.: 1939

IN THE UNITED STATES PATENT OFFICE

Applicant: Robert O. Conn  
Assignee: Xilinx, Inc.  
Title: Interposer for Redistributing Signals  
Serial No.: 10/698,704 File Date: 10-31-03  
Examiner: Alexander O. Williams Art Unit: 2826  
Docket No.: X-1416-3 US Conf. No.: 1939

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Mail Stop AMENDMENT  
COMMISSIONER FOR PATENTS  
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RESPONSE TO RESTRICTION REQUIREMENT

Dear Sir:

In response to the Restriction Requirement mailed from the Patent Office on March 17, 2005, please replace/substitute the following claims as indicated.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 5 of this paper.